

STATE OF ALABAMA BOARD OF EXAMINERS OF LANDSCAPE ARCHITECTS

908 SOUTH HULL STREET • MONTGOMERY, ALABAMA 36104 • (334) 262-1351

Application for Renewal – Landscape Architect Registration Individual

Preferred Contact Information (To be used on our website and for general purposes)

Name.							
Bus. Name:							
Bus. Address:	Bus. Address:			☐ Check box if new info.			
E-Mail Address: A quick e-mail to our off Alabama Registration No			Phone No.: greatly appreciated so we can correctly capture your address. Last 4 Digits of SSN				
IS YOUR COMPANY POSITION IN FIRM:	'		ociation Stockholder	Partnership ☐ Officer			
	Secondary Contact	t Information (For E	Board Use only	·)			
Name:							
Bus. Name:							
Bus. Address:	Bus. Address:			☐ Check box if new info.			
E-Mail Address:			Phone No.:				
	INDIVIDUAL RENEWA LATE PENALTY (If received or postman		\$150.00 \$ 50.00				
	For a Certificate of Aut	thorization, please cont	tact our office.				
· ·	en convicted of a crime other a ain on separate sheet.	than a minor traffic off	ense?	□ Yes	□ No		
website (www.abo of Alabama. I also is also on the Boa	ve read the Alabama Landso rela.alabama.gov) and I am o certify that I have read the ard website) and will act in a formation contained on this	qualified to practice Alabama Landscape accordance with the r	Landscape A e Architectural requirements o	Architecture in the Code of Conduction to the Conduction the Coutlined in	ne State uct (that Code of		
	-	Signature					

Completed application and required fee payable to Alabama Board of Examiners of Landscape Architects must be received or postmarked no later than January 31st in order to insure timely renewal of your license. A late charge of \$50.00 will be added if not received or postmarked by January 31st.

Continuing Education Credit Form

b. Total PDH earned in 2009

c. Total PDH available for credit in 2010 (15 required)

d. PDH earned October 15, 2009 through December 31, 2009 to be used in fulfillment of 2010 requirements (not to exceed 15)

Section A I hereby certify that: ☐ I qualify for exemption under Rule 500-X-2-.14 (10) based on: Retired ☐ Military Service ☐ Disability/Illness ☐ Age 65 ☐ New Registrant ☐ Foreign Employment ☐ The Summary of Credits below is true and correct and states accurately those Professional Development Hours (PDH) which I have earned during the period from January 1, 2009 through December 31, 2009. (Complete Section B Summary of Credits.) Signature:_ AL Registration No._ Section B - Summary of Credits Sending verification of PDH is NOT required. You are responsible for maintaining those records. Professional Date(s) of Sponsoring Organization Name, City & State **Activity Title/Description** Development Hours PDN **Activities** TOTAL PROFESSIONAL DEVELOPMENT HOURS **PDH Units Description of Activities PDH Units Description of Activities** 5. Teaching or instructing as described in 1. Successfully completing/monitoring 1 Sem. hr.-45 PDH/15 PDH 1 through 4 college or university sponsored 4 times PDH earned in 1 through 4 Rule 500-X-2-.14 (6) (e) 1 Qtr. hr.-30 PDH/10 PDH courses. Rule 500-X-2-.14 (6) (a) 2. Successfully completing courses 6. Authoring publishing papers, articles or 1 PDH times preparation time which are awarded continuing books 10 PDH for each CEU (not to exceed 25 PDH) educational units (CEU) Rule 500-X-2-.14 (6) (f) Rule 500-X-2-.14 (6) (b) 3. Attending seminars, tutorials, short 7. Making presentations at technical courses, correspondence courses, meetings 2 times PDH earned in 1 through 4 1 PDH for each contact hr. televised courses or videotaped Rule 500-X-2-.14 (6) (g) courses Rule 500-X-2-.14 (6) (c) 8. Attending program presentations at 4. Attending in-house programs related technical or professional sponsored by corporations or other 1 PDH for each contact hr. 1 PDH for each contact hr. meetings organizations Rule 500-X-2-.14 (6) (h) Rule 500-X-2-.14 (6) (d) a. PDH earned October 15, 2008 through December 31, 2008 and not used in fulfillment of 2009 requirements